APPLICATION DATA SHEET

Contract or Grant Numbers::

Secrecy Order in Parent Appl.::

Application Information Application Number:: Filing Date:: Application Type:: Regular Utility **Subject Matter::** Suggested Classification:: Suggested Group Art Unit:: CD-ROM or CD-R?:: Number of CD Disks:: **Number of Copies of CDs::** Sequence Submission?:: Computer Readable Form (CFR)?:: **Number of Copies of CFR::** ANALYZING SOFTWARE PERFORMANCE DATA Title:: USING HIERARCHICAL MODELS OF SOFTWARE STRUCTURE 42339-192084 **Attorney Docket Number::** Request for Early Publication?:: NO NO Request for Non-Publication?:: **Suggested Drawing Figure::** 2 **Total Drawing Sheets::** 10 **Small Entity?::** NO Latin Name:: **Variety Denomination Name::** Petition Included?:: **Petition Type:: Licensed US Govt. Agency::**

Applicant Information

Inventor **Applicant Authority Type::**

U.S. **Primary Citizenship::**

U.S.A. Country::

Status:: **Full Capacity**

Given Name:: Jacob

Middle Name:: K

GOTWALS Family Name::

Name Suffix::

City of Residence:: Albuquerque

State or Province of Residence:: New Mexico

Country of Residence:: Albuquerque

Street of Mailing Address:: 4232 Brockmont Ave., NE

New Mexico

City of Mailing Address:: Albuquerque

State or Province of Mailing

Address::

U.S.A. **Country of Mailing Address::**

87108

Postal or Zip Code of Mailing

Address::

Applicant Authority Type:: Inventor

U.S. **Primary Citizenship::**

U.S.A. Country::

Status:: Full Capacity

Given Name:: Suresh

Middle Name::

SRINIVAS Family Name::

Name Suffix::

City of Residence:: Portland

State or Province of Residence:: Oregan

U.S.A. **Country of Residence::**

Street of Mailing Address:: 5315 NW Crady Lane **City of Mailing Address::**

Portland

State or Province of Mailing

Oregan

Address::

Country of Mailing Address::

U.S.A.

Postal or Zip Code of Mailing

97229

Address::

Correspondence Information

Correspondence Customer

26694

Number::

202-344-4000

Phone Number::

Fax Number::

202-344-8300

E-Mail Address::

Representative Information

Representative Customer

26694

Number::

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
	Continuation of		
	Continuation of		
	Continuation of	-	
	Continuation of		

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::

Assignee Information

Intel Corporation Assignee Name::

2200 Mission College Blvd. **Street of Mailing Address::**

City of Mailing Address:: Santa Clara

State or Province of Mailing CA

Address::

Country of Mailing Address:: U.S.A.

Postal or Zip Code of Mailing

Address::

95052